

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box seal is broken for ballot transport~

At Location

Election Type: General Election

Election Date: 11/08/2022

Name of Location: CHANDLER CITY HALL #15551

Box 2 of 2

Arrival Time: 1:25

Were there ballots to be picked up?



YES <If YES, complete lines 1-7



NO <If NO, complete lines 1-7

Spoils picked up?



YES



NONE

Completed Forms picked up?



YES



NONE

1) Blue Drop Box Seals # IS22019202 & IS22019201 <Indicate the seal numbers that were taken off on blue drop box

2) Blue Drop Box Seals # IS22019256 & IS22019255 <Indicate the seal numbers that were placed on blue drop box

3) Red Box Seals # IS22019278 & IS22019277 <Indicate the seal numbers that were placed on ballot transport box

4) Ballot Box Sealed/Checked on (Date) 10/31/22 (Time) 1:26 Date and time box was sealed/checked

5) Location Staff Member (Signature) Susan Whitaker

6) Transport Staff Member (Signature) [Signature]

7) Transport Staff Member (Signature) [Signature]

Departure Time: 1:27

Transport Receipt

This portion to be completed by the Receiver

Receiving Agent (Signature) [Signature]

Sign to acknowledge receipt from Transport Staff Member

Ballot Box Seals # IS22019277 & IS22019278 If applicable, verify the seal

Blue Drop Box Seals # _____ & _____ <Indicate the seal numbers that were broken from blue drop box

Count of Ballots in Transport Bin # 415

Audit Agent (Signature) [Signature]

Sign to affirm seal #'s match or that no ballots were to be picked up

Date/Time: 10-31-22

Date of Audit Match

ck on process
4:12
Match
m location

379 W 34

4:15

